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HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

IN CHARGE OF

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SURGICAL SUPPLY ROOM

BY JESSIE L. MACDONALD, R.N.

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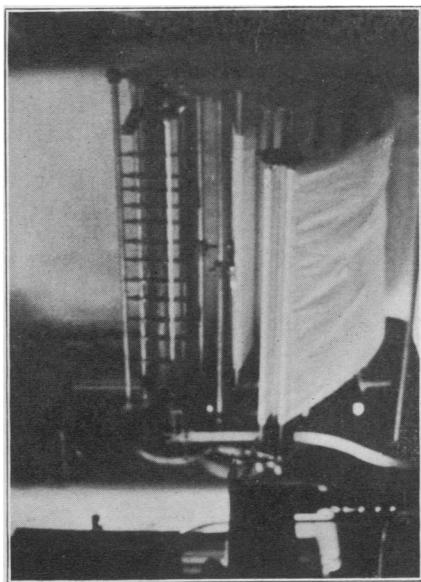
The modern surgical supply room has been established with the definite purpose in view of producing, at a minimum expenditure of time, labor and money, the maximum of efficiency. Our staff comprises a supervisor with five nurses of the preliminary class. These nurses are taught to prepare, cut, fold and wrap the various surgical dressings, at the same time learning the use and method of applying each different one. They are also taught the sterilization, and reasons for asepsis.

The department has two rooms, one for raw material and unsterile supplies, the other for sterilizer and all sterile supplies. The rigid adherence to this arrangement prevents the danger of accidentally using unsterile dressings. The first room is equipped with long marble-topped tables used for folding, cutting and wrapping gauze, large rolls of paper on racks with knives for cutting it, a cupboard for storing material and dressings, and an electric cutter which will cut through seventy-five thicknesses of gauze with a rapid, even stroke. This is a wonderful time and labor-saving device, and gives a more even cut than is possible with knife or scissors. The second room contains the sterilizer and cupboards with bins for sterile supplies.

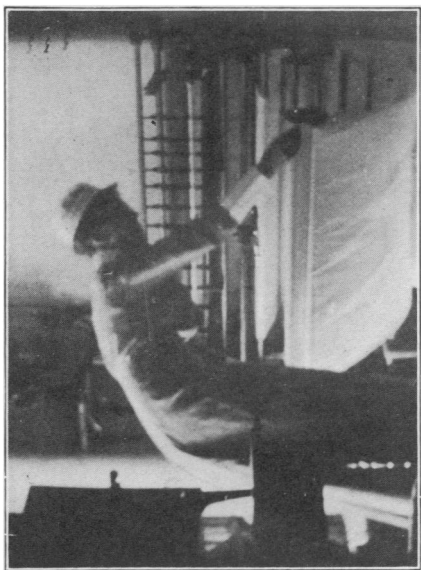
Next in importance is the bandage machine, operated by an electric motor, having twelve knives, which may be adjusted to cut any width of bandage desired, as the material passes over the roller, thus giving in a few minutes, twelve tightly-rolled, well-cut bandages ready to be distributed to the different floors and wards. This is determined by means of order books sent in each morning, a sufficient quantity for dressings for twenty-four hours being ordered.

With the exception of sponges, each dressing is wrapped separately in paper, and is opened only as it is required for use, thus avoiding danger of contamination through handling by inexperienced nurses.

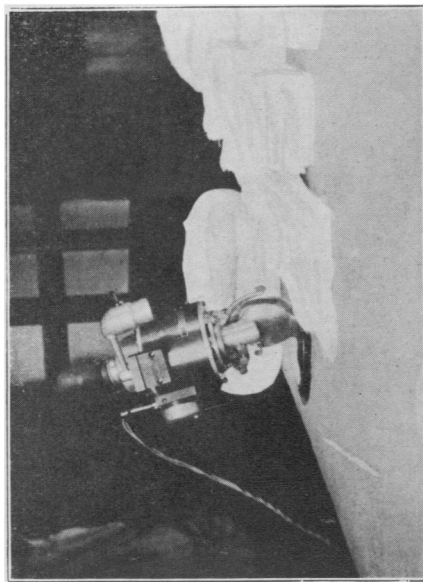
The advantages of a central surgical supply room are numerous. The relative cost of maintaining the room is much less than the former system of having the supplies made in the different wards and floors. All clippings



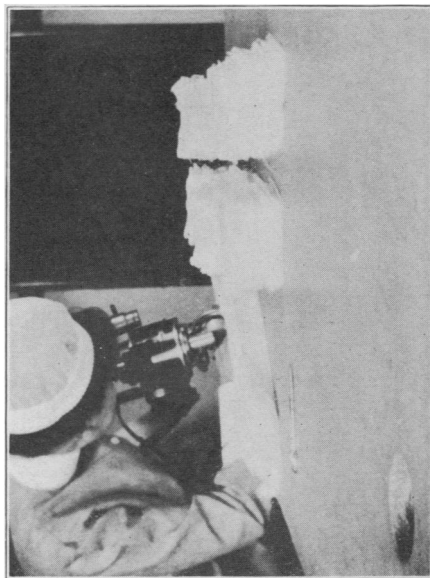
No. 1—BANDAGE MACHINE



No. 2—BANDAGE MACHINE



No. 3—ELECTRIC CUTTER



No.4—ELECTRIC CUTTER

from dressings and bandages, together with newspapers, are used in making absorbent pads. Nothing is wasted or thrown away. All nurses are taught the one method of preparation under close supervision, rather than being taught indifferently by various head nurses. Each floor and ward is assured of having the requisite number of dressings needed daily. Formerly the staff of a busy ward, where perhaps the greatest need was, would find it almost impossible to prepare the required amount. All dressings used have been sterilized within twenty-four hours.

THE VALUE OF TYPHOID VACCINATION

The following conclusions are reached by Major Russell, in an article in the *Journal of the American Medical Association*:

(1) That the inoculations are harmless in healthy persons is now well established. In our own cases not a single ill effect has been discovered among the 3644 inoculated, over 1400 of whom have been under observation by our assistant physicians for a period of four years, many having received two inoculations.

(2) That it confers almost absolute immunity against infection. Our typhoid rate has been reduced from 1 to 2 per cent to nothing.

(3) That the duration of immunity is not yet determined, but it is assuredly two and one half years, and probably longer. Immunity has lasted among those inoculated in 1911 and who were not re-inoculated for at least four years.

(4) That only in exceptional instances does its administration cause any appreciable degree of personal discomfort. None of our patients suffered any inconvenience.

(5) That it apparently protects against a chronic bacillus carrier and is at present the only known means by which a person can be protected against typhoid under all conditions. Previously all known precautions had been tried, but still a few cases developed each fall.

(6) That all persons whose professions or duties involve contact with the sick should be immunized. It is a well-established fact that attendants and nurses are more liable to typhoid infection than those engaged in other occupations—eight times as liable, according to the statistics of the Massachusetts General Hospital.

(7) That the general vaccination of the entire community is feasible and could be done without interfering with the general sanitary improvements, and should be done where the typhoid rate is high.